

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

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NOTE: This is a public document.

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**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

STATE OF HAWAII  
STATE ETHICS COMMISSION**PART I LOBBYIST**

NAME (Last)	(First)	(Middle)	TELEPHONE
Nagasako	Alvin		833-2711
MAILING ADDRESS (Street)			FAX 839-7106
1200 Ala Kapuna Street			EMAIL
			anagasako@hsta.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96819	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Hawaii State Teachers Association (HSTA)			833-2711
MAILING ADDRESS (Street)			FAX 839-7106
1200 Ala Kapuna Street			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96819	

**PART II ORGANIZATION**


NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Hawaii State Teachers Association (HSTA)	833-2711	
MAILING ADDRESS (Street)	FAX 839-7106	
1200 Ala Kapuna Street	EMAIL	
(City)	(State)	(Zip Code)
Honolulu	HI	96819
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
Kendra Ito-Mizota/Gordon Murakami/Tanya Abalos-Arceneaux	833-2711	
MAILING ADDRESS (Street)	FAX 839-7106	
1200 Ala Kapuna Street	EMAIL	
(City)	(State)	(Zip Code)
Honolulu	HI	96819

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Agriculture                              | <input checked="" type="checkbox"/> Education           | <input type="checkbox"/> Human Services                                     | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities        | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input type="checkbox"/> Consumer Protection & Commerce           | <input type="checkbox"/> Hawaiian Affairs               | <input checked="" type="checkbox"/> Labor & Employment                      | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation     | <input type="checkbox"/> Health                         | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                    |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing                        | <input type="checkbox"/> Public Safety & Corrections                        | _____   |

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1.24.13

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME Wil Okabe		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED President, Hawaii State Teachers Association	
NAME OF ORGANIZATION (if applicable) Hawaii State Teachers Association (HSTA)		TELEPHONE 833-2711	
MAILING ADDRESS (Street) 1200 Ala Kapuna Street		FAX 839-7106	
		EMAIL	
(City) Honolulu	(State) HI	(Zip Code) 96819	

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

1/24/13

(Date)